ACCEPTED 01-18-00930-CR FIRST COURT OF APPEALS HOUSTON, TEXAS 10/26/2018 1:31 PM CHRISTOPHER PRINE CLERK

Appellate Docket Number: 01-18-00930-CR

Appellate Case Style: Kyle Dean Kuykendall

Vs. State of Texas

Companion

Case(s): Amended/Corrected Statement

FILED IN

1st COURT OF APPEALS

DOCKETING STATEMENT (Criminal) HOUSTON, TEXAS

Appellate Court

Appellate Court:

1st Court of Appeals

(to be filed in the court of appeals upon perfection of appeal unde CHRISTOPHER A. PRINE

I. Appellant	III. Appellee				
Name: Kyle Dean Kuykendall	Name: State of Texas				
Appellant Incarcerated? × Yes No	Appellee Incarcerated? Yes No				
Bond Amount: N/A	Bond Amount: N/A				
Pro Se	Pro Se				
If Pro Se Party, enter the following information:	If Pro Se Party, enter the following information:				
Address:	Address:				
City/State/Zip:	City/State/Zip:				
Tel. Ext. Fax:	Tel. Ext. Fax:				
Email:	Email:				
II. Appellant Attorney(s)	IV. Appellee Attorney(s)				
Lead Attorney Appointed	Lead Attorney District/County Attorney				
Name: M. Patrick Maguire	Name: Scott Monroe				
Bar No. 24002515	Bar No. 14272700				
Firm/Agency: M. Patrick Maguire, P.C.	Firm/Agency: 198th Judicial District Attorney				
Address 1: 945 Barnett Street	Address 1:402 Clearwater Paseo, Suite 500				
Address 2:	Address 2:				
City/State/Zip: Kerrville, Texas 78028	City/State/Zip: Kerrville, Texas 78028				
Tel. (830) 895-2590 Ext.	Tel. (830) 315-2460 Ext.				
Fax: (830) 895-2594	Fax: (830) 315-2461				
Email: mpmlaw@ktc.com	Email: scottm@198da.com				
Lead Attorney Select	Lead Attorney Select				
Name:	Name:				
Bar No.	Bar No.				
Firm/Agency:	Firm/Agency:				
Address 1:	Address 1:				
Address 2:	Address 2:				
City/State/Zip:	City/State/Zip:				
Tel. Ext.	Tel. Ext.				
Fax:	Fax:				
Email:	Email:				

V. Perfection of Appeal, Judgment and Sentencing

Nature of Case (Subject Matter or Type of Case):

Obstructing Gov't Operations

Type of Judgment:

Bench Trial

Date Trial Court imposed or suspended sentence in open court or date Trial Court entered appealable order:

Offense Charged:

Bail Jumping & Failure to Appear

Date of Offense: November 30, 2015

Defendant's Plea: Guilty

If guilty, does defendant have the Trial Court's

Certificate to Appeal? x Yes No

Was the Trial by:

Jury × Non-Jury

Date Notice of Appeal filed in Trial Court:

August 31, 2018

If mailed to the Trial Court clerk, also give the date mailed:

Punishment Assessed:

10 years imprisonment

Is the Appeal from the pre-trial order?

Yes x No

Does the Appeal involve the constitutionality or the

validity of a statute, rule or ordinance?

Yes × No

VI. Actions Extending Time To Perfect Appeal

Motion for New Trial:

Yes × No If yes, date filed:

Motion in Arrest of Judgment:

Yes × No If yes, date filed:

Other:

Yes × No If yes, date filed:

If Other, please specify:

VII. Indigency of Party (Attach file stamped copy of Motion and Affidavit)

Motion and Affidavit filed:

Yes No \times N/A

If yes, date filed:

Date of Hearing:

 $\times N/A$

Date of Order:

 $\times N/A$

Ruling on Motion:

Granted

Denied

× N/A

If granted or denied, date of ruling:

VIII. Trial Court and Record Court: 198th Judicial District Court Clerk's Record Trial Court Clerk: × District County County: Kerr Was Clerk's record requested?: × Yes No Trial Court Docket No. (Cause No.): B15-684 If yes, date requested: August 31, 2018 Trial Court Judge (who tried or disposed of the case): If no, date it will be requested: Name: Rex Emerson Were payment arrangements made with clerk? Address 1: 700 Main Street × Indigent Yes No Address 2: City/State/Zip: Kerrville, Texas 78028 Tel. (830) 792-2290 Ext. Fax: (830) 792-2294 Email: cmc@co.kerr.tx.us Reporter's or Recorder's Record Is there a Reporter's Record? × Yes No Was Reporter's Record requested?: × Yes No If yes, date requested: August 31, 2018 If no, date it will be requested: Was the Reporter's Record electornically recorded? Yes × No No × Indigent Were payment arrangements made with the court reporter/court recorder? Yes Court Recorder Court Recorder Court Reporter ☐ Court Reporter Substitute Official × Official □ Substitute Name: Paula M. Beaver Name: Address 1: Address 1: P.O. Box 233 Address 2: Address 2: City/State/Zip: City/State/Zip: Comfort, Texas 78013 Ext. Tel. Tel. (830) 537-4724 Ext. Fax: (830) 537-4724 Fax: Email: paulabeaver2@aol.com Email:

IX. Related Matters				
List any pending or past related appeals before this, or any c	other Texas Appellate Court, by Court, Docket, and Style.			
Court: Select Appellate Court	Docket:			
Style:				
Vs.				
Court: Select Appellate Court	Docket:			
Style:				
Vs.				
	Docket:			
Style:	Docket.			
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Style:				
Vs.				
Court: Select Appellate Court	Docket:			
Style:				
Vs.				
Court: Select Appellate Court	Docket:			
Style:				
Vs. ∧ ∧				
X) Signature				
MINIMA	October 26, 2018			
Signature of counsel (or Pro Se Party)	Date			
M. Patrick Maguire	24002515			
Printed Name	State Bar No.			
	M. Patrick Maguire			
Electronic Signature (Optional)	Name			
XI. Certificate of Service				
The undersigned counsel certifies that this Docketing S	tatement has been served on the following lead counsel for all			
parties to the Trial Court's Order or Judgment as follows:	· ·			
ALL SIXTURE IN TO				
Signature of counsel (or Pro Se Party)	Electronic Signature (Optional)			
24002515				
State Bar No.	_			
	ote of coming must be singled by the			
Certificate of Service Requirements (TRAP 9.5(e)): A certificate of service must be signed by the person who made the service and must state:				
(1) the date and manner of service;(2) the name and address of each person served, and				
	a party's attorney, the name of the party represented by the attorney			

Please enter the following for each per	rson served:		
Date Served: October 26, 2018			
Manner Served: eServe			
Name: Scott Monroe			
Bar No. 14272700			
Firm/Agency: 198th Judicial District Attorney			
Address 1: 402 Clearwater Paseo, Suite 500			
Address 2:			
City/State/Zip: Kerrville, Texas 78028			
Tel. (830) 315-2460 Ext.			
Fax: (830) 315-2461			
Email: scottm@198da.com			
Date Served:			
Manner Served: Select			
Name:			
Bar No.			
Firm/Agency:			
Address 1:			
Address 2:			
City/State/Zip:			
Tel. Ext.			
Fax:			
Email:			